CleanSmoke Coalition A.I.S.B.L. Application for membership

A) General information company/ organisation



Members can be exclusively private persons, companies and associations, that have a professional interest in smoked food and the smoking industry.

Company/ organisation name:		
Street:		House number:
City:		Postal code:
Country:	VAT re	gistration number:
Phone:	Websi	te:
Main contact/ representative: Mr Mrs		Title:
Surname:	First name:	
Department:	Position:	
Phone:	Email:	
B) General information private person Salutation: Mr Mrs Surname:	First name:	Title:
Phone:	Email:	
Street:		House number:
City:		Postal code:
County:		
C) How are you currently associated with the smoking industry? (Basis for membership fee)		
Smoke traders Retailer Smoke equipment manufacturer		
Industrial manufacturer Small trader, supplying artisanry Artisanry		
NGO Primary smoke product manufacturers Other:		
I hereby assure that I am authorised to officially Date/ Signature	represent my compa	ny/organisation or division.
I hereby assure that I have read the CleanSmoke	Coalition statutes.	
Date/ Signature		

Membership fees corresponding to appendix.

Future membership fees are determined by the members. Donations are welcome. Members receive discounts on congresses and continuing education events of the CleanSmoke Coalition